Docket Number: 008312-0278088 Client Reference: T4AO-00S0902-1

## PATENT APPLICATION

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re the Application of

**OTSUKA** 

Group Art Unit: 2123

Application No.: 09/804,302

Examiner: T. STEVENS

Filed: March 13, 2001

Confirmation No.: 9268

For: SIMULATOR AND SIMULATION METHOD

October 15, 2004

## INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Pursuant to 37 CFR 1.56, the attention of the Patent and Trademark Office is hereby directed to the reference(s) listed on the attached PTO-1449. Unless otherwise indicated herein, one copy of each reference is attached. It is respectfully requested that the information be expressly considered during the prosecution of this application, and that the reference(s) be made of record therein and appear among the "References Cited" on any patent to issue therefrom. Applicants respectfully request the Examiner return an initialed copy of the enclosed Form PTO-1449 to Applicants with the next Office communication to indicate that the reference(s) has been considered, per MPEP § 609.

This Information Disclosure Statement is being filed more than three months after the U.S. filing date AND after the mailing date of the first Office Action on the merits, but before the mailing date of a Final Rejection or Notice of Allowance.

Please charge Deposit Account 033975 in the amount of \$180.00 in payment of the fee under 37 CFR 1.17(p). Please credit or debit Deposit Account 033975 as needed to ensure consideration of the disclosed information.

10/18/2004 HVUONG1 00000112 033975 09804302

01 FC:1806

180.00 DA

English-language Abstracts of the non-English language references are attached hereto.

Respectfully submitted,

PILLSBURY WINTHROP LLP

Christophe F. Lair Reg. No. 54248

CFL/smm P.O. Box 10500 McLean, VA 22102

Telephone: (703) 905-2000 Facsimile: (703) 905-2500 Customer Number: 00909

| (PW FORM                         | epartn<br>PAT- | (modified)<br>nent of Commero<br>1449)<br>rademark Office | ce ·         | CRES            | <b>)</b>          | 5 2004            |              | Atty. 🖒<br>Dkt. No.         | M#  |               | Client                                       |  | 50003                         |                |  |
|----------------------------------|----------------|---|--------------|-----------------|-------------------|-------------------|--------------|-----------------------------|---|---------------|--|--|-------------------------------|----------------|--|
| INFORMATION DISCLOSURE STATEMENT |                |   |              |                 |                   |                   |              |                             | 278088  |               |  |  |                               |                |  |
| BY APPLICANT                     |                |   |              |                 |                   |                   |              |                             | Appln. No.: 09/804,302  |               |  |  |                               |                |  |
|                                  |                |   |              |                 |                   |                   |              | Filing Date: March 13, 2001 |   |               |  |  |                               |                |  |
| Date: Octo                       | ber 1          | 5, 2002   | Page         | 1               | of                | 1                 |              | Examiner                    | : STEVENS, T H.   |               |  |  |                               |                |  |
| U.S. PATE                        | NT D           | OCUMENTS  |              |                 |                   |                   |              |                             | V. Marine   |               |  | 5  |                               | <b>3</b> 7 1 7 |  |
| Examiner'<br>s<br>Initials*      |                | Document<br>Number  |              | Date<br>MM/     | <b>/</b>          | Name<br>(Family N | Name (       | of First Inv                | rentor)   | Class         | s Sub<br>Clas                                | s  | Filing<br>Date<br>(if appropi | riate          |  |
|                                  | AR             |   |              | ļ               |                   |                   |              |                             |   |               | <u> </u>                                     |  |                               |                |  |
|                                  | BR             |   |              |                 |                   |                   |              |                             |   |               |  |  |                               |                |  |
|                                  | CR             |   |              | <b> </b>        |                   |                   |              |                             |   |               |  |  | <del> </del>                  |                |  |
|                                  | DR<br>ER       |   |              | ļ <u>.</u>      |                   |                   |              |                             |   |               |  |  | <del> </del>                  |                |  |
| <b></b>                          | FR             |   |              |                 |                   |                   |              |                             |   |               |  |  | <del> </del>                  |                |  |
|                                  | GR             |   | -            |                 |                   |                   |              |                             | <del></del>   | <u> </u>      |  |  | †                             |                |  |
|                                  | HR             |   |              |                 |                   |                   |              |                             |   |               |  |  |                               |                |  |
|                                  | IR             |   |              |                 |                   |                   |              |                             |   |               |  |  |                               |                |  |
|                                  | JR             |   |              |                 |                   |                   |              |                             |   |               |  |  |                               |                |  |
|                                  | KR             | ·   |              |                 |                   |                   |              |                             |   |               | -  |  |                               |                |  |
|                                  | LR             |   |              | ļ               |                   |                   |              |                             | <del></del>   |               |  |  | <u> </u>                      |                |  |
|                                  | MR             |   |              |                 |                   |                   |              |                             |   |               |  |  | <del></del>                   |                |  |
|                                  | NR             |   |              | Sign til i anna | Salinagas militar | 2243-2340-23      | eccional ave |                             | . vena 200 v |               | <u>,                                    </u> | ***  | <del></del>                   |                |  |
| FOREIGN                          | PATI           | ENT DOCUME  |              |                 |                   |                   | T            |                             |   |               | English<br>Abstract                          |  | Translati<br>Readily          | ion            |  |
|                                  |                | Document<br>Number  | Date<br>MM/Y | <b>YYY</b>      | Coun              | try               | Inven        | tor Name                    |   |               |  |  | Available                     | 9              |  |
|                                  |                | INdiffiber  |              | • • •           |                   |                   | 1            |                             |   |               | Enclosed                                     | No   | Enclose                       | TNO            |  |
|                                  | OR             | 2707406   | 07/19        | 93              | Franc             | :e                | Sibel        | las et al.                  |   |               | х  |  | 1                             | ×              |  |
|                                  | PR             | 19703090  | 01/19        |                 | Germ              |                   | Stoll        |                             |   |               | ×  |  | †                             | x              |  |
|                                  | QR             | 29709753  | 06/19        |                 | Germ              |                   |              |                             |   |               | ×  |  | 1                             | x              |  |
|                                  | RR             | 4407987   | 03/19        |                 | Germ              |                   | Jehlir       | ng                          | -   |               | х  | /  |                               | х              |  |
|                                  | SR             |   |              |                 |                   |                   |              |                             |   |               |  |  |                               | L              |  |
|                                  | TR             |   |              |                 | <u> </u>          |                   | —            |                             |   |               |  | _  | ļ                             | 4              |  |
|                                  | UR             |   |              |                 | <u> </u>          |                   |              |                             | <u> </u>  |               |  | <del> </del>                                     | <u> </u>                      | $\bot$         |  |
| <del></del>                      | VR             |   |              |                 | -                 |                   | 1            |                             |   |               |  | ┼  | <u> </u>                      | +              |  |
|                                  | WR.            |   |              |                 | <del> </del>      |                   |              |                             |   |               |  | +  | <del> </del>                  | ╁              |  |
| OTHER //                         | XR             |   |              | Restaura (      | <u> </u>          |                   |              |                             |   | (0.00) (2000) |  | +-   | <del> </del>                  | ┿              |  |
| OTHER (II                        |                | ng:in:tnis:order<br>                                      | Author,      | alitie,         | Reriod            | iicai Name        | e, Date      | e, Pertinen                 | t(Pages, etc.)  | 10000         |  |  |                               |                |  |
|                                  | YR<br>ZR       |   |              |                 |                   |                   |              |                             | <del></del>   |               |  | +  | <del> </del>                  | 十              |  |
|                                  | AAR            |   |              |                 |                   |                   |              |                             |   |               |  | <del>                                     </del> | <del> </del>                  | +              |  |
|                                  | BBR            |   |              |                 |                   |                   |              |                             |   |               |  | T  |                               | T              |  |
|                                  | CCR            |   |              |                 |                   | <del></del>       | _            |                             |   |               |  |  |                               | T              |  |
|                                  | DDR            |   |              |                 |                   |                   |              |                             |   |               |  |  |                               | Ι              |  |
| Examiner                         |                |   |              |                 |                   |                   |              | Date Con                    | sidered:  |               |  |  |                               |                |  |
|                                  | R:             | 1   | consider     | ad wh           | other o           | not citatio       | n ie in      | conforman                   | ce with MPEP § 609  | Dra           | w line the                                   | rough  | citation                      | if             |  |